

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Majority PAC			FEC IDENTIFICATION NUMBER ▼ C C00484642		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY					
Full Name of Payee Ralston Lapp Media			Date of Public Distribution/Dissemination MM / DD / YYYYYY 05 / 16 / 2014		
Mailing Address 1054 31st St NW Ste 430			Amount 11707.20		
City Washington State DC Zip Code 20007-6042		Transaction ID : VN7GB9SDGH4 Date of Disbursement or Obligation MM / DD / YYYYYY			
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type 			
Name of Federal Candidate Cory Gardner			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought 763686.74			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Waterfront Strategies			Date of Public Distribution/Dissemination MM / DD / YYYYYY 05 / 16 / 2014		
Mailing Address 3050 K St NW Ste 100			Amount 215710.00		
City Washington State DC Zip Code 20007-5108		Transaction ID : VN7GB9SDGJ2 Date of Disbursement or Obligation MM / DD / YYYYYY			
Purpose of Expenditure Media Buy		Category/ Type 			
Name of Federal Candidate Cory Gardner			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought 763686.74			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			227417.20		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			227417.20		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Rebecca Lambe</i>			Date MM / DD / YYYYYY 05 / 18 / 2014		
[Electronically Filed]					